

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO.		FILING DATE		
							APPLICANT(S)				
CLAIMS											
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT						
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP
1							51				
2							52				
3							53				
4							54				
5	1						55				
6							56				
7							57				
8							58				
9							59				
10	1						60				
11							61				
12							62				
13							63				
14							64				
15							65				
16	1						66				
17							67				
18							68				
19							69				
20							70				
21							71				
22		1					72				
23		4	3				73				
24		4	3				74				
25	1						75				
26							76				
27		1					77				
28							78				
29							79				
30							80				
31							81				
32							82				
33							83				
34							84				
35							85				
36							86				
37							87				
38							88				
39							89				
40							90				
41							91				
42							92				
43							93				
44							94				
45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
TOTAL IND.	2						TOTAL IND.				
TOTAL DEP.	75						TOTAL DEP.				
TOTAL CLAIMS	77						TOTAL CLAIMS				